

Identified Metrics and Outcomes for Children's System - August 11, 2020

	Outcome	Suggested Metric(s)	How to Measure (what pieces of data need to be collected to define metric)	Existing Data Sources
1	Outcome 5: Children with complex behavioral health needs will live safe, healthy, successful lives.	5.4 Increase in access to comprehensive, coordinated treatment and supports	a) Claims data of services received b) Primary diagnosis for services c) Number of children on waiting list to receive services d) Number of and type of providers (eg, # inpatient beds, psychiatric services, etc) e) ER visits data for mental health services f) # of childrens mental health waivers (looking at growth over time) g) montioring of provider service rate changes over time h) commercial insurance service array i) growth in telemedicine services j) number of children enrolled in IHH	a) DHS - Medicaid enterprise data or other data source b) DHS - Medicaid enterprise data or other data source c) Hospital data (only inpatient); CMHC d) DHS, Public health, Counties, MCO provider network data by service
2	Outcome 4: All children have a support system.	4.6 Increase in number of people who know how to access services	a) Population survey of families about services b) MCO CAPHS survey - patient satisfaction data (medicaid only)	None
3	Outcome 4: All children have a support system.	4.7 Decrease in youth suicide ideation, attempts, and completions	a) ER visits for suicide b) inpatient admission and pmic administion of suicide ideation c) Completion data from Iowa Violent Death reporting system. d) % of students who reported they had a plan to kill themselves in the past 12 months (IYS)	Iowa Violent Death Reporting System (IDPH) DHS, MCOs, private insurers Iowa Youth Survey (IYS)
4	Outcome 3: All children have access to a gold standard of care.	3.2 Increase in number of children who have timely access to appropriate, culturally responsive local behavioral health services with quality providers	a) Geo-access data from MCOs - Did the child get services within 30 miles b) Wait time in ERs	a) Regional data

5	Outcome 4: All children have a support system.	4.2 Increase in number of crisis intervention services that are not law enforcement	a) MCO claims data on crisis services delivered b) Regions providing service	a) claims data b) Regional data
6	Outcome 4: All children have a support system.	4.3 Increase in number of behavioral health services and supports in schools	MCOs have data for "place of service" data in schools	MCOs
7	Outcome 3: All children have access to a gold standard of care.	3.1 Increase in number of children who have insurance with adequate coverage	a) Numbers of children covered by Medicaid and Hawki b) Is this child's current insurance coverage usually/always adequate to meet his/her needs? (NSCH) c) Number of children covered under commercial insurance	DHS--Youth on Title XIX National Survey of Children's Health (NSCH)
8	Outcome 1: All children receive a behavioral health screening.	1.1. Deferred until screening panel has completed their report	a) M-CHAT b) Survey of Well Being of Young children (SWYC) c) Patient Health Questionnaire (PHQ) d) ASQ & ASQ-SE2 & 3 e) SDQ f) EPSDT	a) Schools b) Healthcare system c) IME d) IDPH (DAISEY)
9	Outcome 4: All children have a support system.	4.5 Increase in family engagement and involvement during treatment and post-discharge	a) Number of children receiving family BHS services or family therapy post inpatient or PMIC discharge. b) Family services delivered while in PMIC	Group care facilities data
10	Outcome 5: Children with complex behavioral health needs will live safe, healthy, successful lives.	5.5 Decrease in contact with law enforcement and juvenile court	a) number of complaints to Juvenile Court Services	CJJP/JCS Data